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OUR REF: 11816.56USU1
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Please charge Deposit Account No. 13-2725 in the amount of \$1104.00 for \$846 (Fee Code 1202/2202) for 47 additional claims; \$258 (Fee Code 1201/2201) for 3 additional independent claims. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

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